

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>	<i>CR ATA</i>	S35 853	06-13-01 2/21/01

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
- (Through numeral)... Canceled		A .....	Appeal
+ .....	Restricted	O .....	Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	✓	51	✓	101	
2		52	✓	102	
3		53	✓	103	
4		54	✓	104	
5		55	✓	105	
6		56	✓	106	
7		57	✓	107	
8		58	✓	108	
9		59	✓	109	
10	✓	60	✓	110	
11	✓	61		111	
12	✓	62	V	112	
13	✓	63	V	113	
14	✓	64	V	114	
15	✓	65	V	115	
16	✓	66	V	116	
17	✓	67	V	117	
18	✓	68	V	118	
19	✓	69	V	119	
20	✓	70	J	120	
21	✓	71	J	121	
22	✓	72	J	122	
23	J	73	J	123	
24	V	74	J	124	
25	J	75	J	125	
26	J	76	J	126	
27	J	77	J	127	
28	J	78	J	128	
29	J	79	J	129	
30	V	80	J	130	
31	V	81	J	131	
32	V	82	J	132	
33	V	83	J	133	
34	J	84	J	134	
35	V	85	J	135	
36	J	86	J	136	
37	J	87	J	137	
38	J	88	J	138	
39	V	89	J	139	
40	V	90	J	140	
41	V	91	J	141	
42	✓	92	J	142	
43	J	93	J	143	
44	V	94	J	144	
45	V	95	J	145	
46	✓	96	✓	146	
47	✓	97	✓	147	
48	✓	98		148	
49	✓	99		149	
50	✓	100		150	

If more than 150 claims or 10 actions  
staple additional sheet here

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TC S235